

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL086010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 04/09/2015
NAME OF PROVIDER OR SUPPLIER RIDGE CREST RETIREMENT		STREET ADDRESS, CITY, STATE, ZIP CODE 1000 RIDGE CREST LANE MOUNT AIRY, NC 27030		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments This report is of a Biennial Construction Survey done by Bob Getchell on April 9, 2015. Information from the DHSR Master Facility and LTI Files this facility was first licensed or submitted for licensure on 11-24-1997, for 28 residents. Based on this information, we are requiring the facility to meet the 1996 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1996 North Carolina State Building Code with 1997 revisions, Section 409 - Institutional Occupancy. Deficiencies were noted which will require a new plan of correction.	C 000		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Based on observation, the current fire reports were not available at the time of the survey. Findings include: The following reports were not available at the time of the survey: a) Fire Marshalls Report.	C 111		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER	C 189		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 189	<p>Continued From page 1</p> <p>REQUIREMENTS</p> <p>(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the building was not maintained in a safe manner by not maintaining the fire-resistance rating of building components. This would effect all residents by not containing smoke and fire in the room or smoke compartment of origin.</p> <p>Findings include:</p> <p>a. The attic smoke barrier wall over the private dining room has unprotected penetrations by pipe and cable.</p> <p>b. The 1-hour fire resistance rated kitchen ceiling has unprotected penetrations by conduit over the (i) Ansul tank, and, (ii) Ansul pull station.</p> <p>c. The pantry has an unprotected penetration in the wall behind the door,</p> <p>d. The service corridor mechanical room ceiling has (i) an unsealed conduit penetration, (ii) a split ceiling, and, (iii) Unprotected hole next to the duct in the ceiling.</p> <p>These unprotected openings are not in conformance with the requirement to use a through penetration fire stop system that has been tested in accordance with ASTM E-814.</p>	C 189		

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C 189	<p>Continued From page 2</p> <p>2. Based on observation, the building fire protection equipment was not maintained in a safe manner. This would effect all residents by not activating the fire alarm in a timely manner.</p> <p>Findings include: There are sprinkler escutcheons dropped or missing in the following locations: a) Storage at Med Room, b) Activity closet, c) Bedroom 220 (ALL missing), d) Soiled Utility, e) Mechanical Room at resident laundry, f) Resident laundry, g) resident laundry closet, h) Walk-in refrigerator.</p> <p>3. Based on observation, the building electrical system was not maintained in a safe manner because GFCI outlets are defective. This would effect all residents by potentially exposing them to a shock hazard</p> <p>Findings include: GFCI outlets will not trip when tested in the following locations: a) Kitchen at the grill, b) In the whirlpool bathroom.</p> <p>4. Based on observation, the building fire protection equipment was not maintained in a safe manner. This would effect all residents by not activating the fire alarm in a timely manner.</p> <p>Findings include: There are HVAC duct detector sample tubes that are dirty in the Kitchen Mechanical Room.</p> <p>5. Based on observation, the building fire protection equipment was not maintained in a safe manner. This would effect all residents by blocking sprinkler coverage.</p> <p>Findings include:</p>	C 189		

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C 189	<p>Continued From page 3</p> <p>There are sprinkler heads blocked by insulation in the attic over room 221.</p> <p>6. Based on observation, the building was not maintained in a safe manner by not maintaining a door that is required to be self-closing. This would effect all residents by not containing smoke and fire in the room or smoke compartment of origin.</p> <p>Findings include: a. The Soiled Utility Room has had the door closer removed.</p> <p>7. Based on observation, the building HVAC returns were not maintained in a safe manner by not cleaning off dirt and dust buildup.. This would effect all residents by exposing them to airborne contaminants.</p> <p>Findings include: a. The HVAC returns are caked up with dust and dirt and need cleaning.</p> <p>8. Based on observation, the building electrical system was not maintained in a safe manner by allowing residents to use expansion blocks in the outlets. This would effect all residents by potentially overloading electrical circuits in the bedrooms.</p> <p>Findings include: Outlet expansion devices were observed in the Director of Nursing Office. Provide a UL-listed, grounded power strip with over current protection per NFPA 70.</p>	C 189		